

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)						SERIAL NO. <div style="font-size: 1.2em; font-weight: bold;">10/517536</div>	FILING DATE				
						ADJUDICANT(S)					
CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
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TOTAL SEA		↓		8		↓		↓		↓	
TOTAL CLAIM		↓		10		↓		↓		↓	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS